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WAKEFIELD

RURAL DISTRICT COUNCIL.

REPORT OF THE

MEDICAL OFFICER OF HEALTH

for the year ended

DECEMBER 31 st. 1954.



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THE UNIVERSITY OF CHICAGO

DEPARTMENT OF THE HISTORY OF ARTS AND ARCHITECTURE

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W A K E F I E L D R U R A L D I S T R I C T C O U N C I L .

Chairman to the Council: Councillor J. Crowther.

PUBLIC HEALTH COMMITTEE
(as at present constituted)

CHAIRMAN: COUNCILLOR E. CROSSLEY.

VICE CHAIRMAN: COUNCILLOR W. B. SPURR.

MEMBERS:

COUNCILLOR J. E. CAWTHORNE.	COUNCILLOR J. CHALKLEY.
COUNCILLOR R. E. COOPER.	COUNCILLOR J. CROWTHER.
COUNCILLOR R. DARWELL.	COUNCILLOR J.T. FOLEY, J.P.
COUNCILLOR B.A. HARDCASTLE.	COUNCILLOR MRS. I. HEPPLESTON.
COUNCILLOR E. JOHNS.	COUNCILLOR F.W. MIDDLETON.
COUNCILLOR J.H. MILNE.	COUNCILLOR W. SANDHAM.
COUNCILLOR MRS. A.P. WIGHTMAN.	

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CLERK TO THE COUNCIL: G. ARMITAGE.

DEPUTY CLERK AND FINANCIAL OFFICER: A. ELSTONE, A.R.V.A.,
A.C.C.S.

ENGINEER AND SURVEYOR: E. C. PAYNE, B.Sc.,
A.M.I.C.E.

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PUBLIC HEALTH DEPARTMENT STAFF.

Medical Officer of Health:

Frederick G. E. HILL, D.S.O., M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health:

Barbara Briggs, M.B., Ch.B., D.P.H.

Chief Sanitary Inspector:


E. Hield, M.S.I.A.

Additional Sanitary Inspector:

C. Cannon, A.R.S.I.

Clerk:

Miss M. Lloyd.



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SECTION A. - GENERAL STATISTICS.

Area of Wakefield Rural District	21,335	acres.
Population (1951 Census)	19,199	
Population (Registrar-General's Estimate) Mid 1954	19,200	
Number of Inhabited Houses (Rate Books)	5976	
Rateable Value (December 31st, 1954)	£87,271	
Sum represented by a Penny Rate:	£333.	

INTRODUCTORY STATEMENT.

To the Chairman and Members of the Wakefield Rural District Council.

Gentlemen:

I have the honour to present to you the Annual Report of the Medical Officer of Health for the year ended December 31st, 1954.

The Medical Officer of Health for Wakefield Rural District had resigned his appointment at the beginning of the year, being offered a new appointment, and his employment with this Council terminated early in February, 1954.

In view of the vacancy created by this resignation, the West Riding County Council, in furtherance of their policy of reducing Health Divisions in the administrative County, proposed that the Ossett Division of which the Wakefield Rural District is a constituent member, should be amalgamated with the Morley Division.

The policy of the County has been adopted to effect economy in Divisional Administration, largely through reduction in staff - medical and clerical, and to effect this, the proposals entail the merging of the Divisional Offices and their separate staffs.

No curtailment of existing medical or welfare services is suggested or implied in the proposals.

A provisional agreement was reached to operate the County's proposals for a period and consequently as from February 1954, the Medical Officer of Health of Morley was appointed Acting Divisional Medical Officer to the existing Number 13 Division, and also Acting Medical Officer of Health to the constituent County District Councils.

The Divisional Offices remained as before, established in each Division and carrying on the separate administration, Later, in 1955, agreement was reached on the County Council's proposals which were then accepted by the Ministry of Local Government.

Effect was given to the agreement by the merging of the Divisional Offices and the amalgamation of the Divisions on July 1st, 1955.

An outstanding change during the year was effected through the transfer from the Ministry of Food (and Ministry of Labour) of the distribution of National Dried Milk and Ministry Vitamin Foods, through Welfare services of the Local Health Authority, i.e. the West Riding County Council.

Essentially this involved adding National Dried Milk and the Vitamin preparations to those Dried Milk and accessory foods already distributed through the various clinics and Welfare Centres, but in practice this added greatly to the volume of work undertaken, and in cases to reorganisation of the times and places of distribution, and to assist in dealing with this, one whole-time clerk, previously so employed by the Ministry of Food, was transferred to the Divisional Health Staff of the then existing No. 13. Division.

The date fixed for transfer of function to the Local Health Authority was June 1954, and this service continues.

The Annual Report for 1954 has again been prepared in accordance with the general instructions of the Ministry and in their approved form.

This Annual Report, in general, is satisfactory.

There has been little variation in the figures given this year under General and Vital Statistics.

There were 312 live births notified giving a birth-rate of 16.25 (corrected rate 15.6)

189 deaths were notified, giving a death rate of 11.8.

No maternal death was registered so the Maternal Death Rate is again recorded as nil.

The infant death-rate, that is, the death-rate of all infants under 1 year of age expressed per 1,000 live births is 22.11. This is a very satisfactory figure.

Infectious diseases have not been prevalent and no undue incidence of any infectious disease is reported for 1954.

One case of acute poliomyelitis was notified. This patient, a school child, was admitted to Hospital and later discharged.

13 cases of dysentery were notified. These were of the mild type, prevalent in most areas and due to infection with the sonnei organism.

Three cases of Food Poisoning were notified. These cases are referred to in the body of the report.

A number of cases of puerperal pyrexia were notified from a Maternity Institution in the Rural District but in no case was the diagnosis confirmed as an essential puerperal infection.

In this report I have included statements regarding Welfare Services of the Local Health Authority, that is, the West Riding County Council.

This information regarding School Health, Maternity, Infant Welfare Services etc. is included because of its interest to members of the Local County District Council, who are concerned with Sanitary, Housing and similar Public Health Administration.

In general, the standard of the services referred to has been well maintained and in some respects improved.

Again, in 1954, action has been taken in respect of a number of unfit houses, and this has resulted in closure or demolition.

New houses have been provided to meet local requirements and records show a total of 237 new houses built in 1954, 222 by the Rural District Council and 15 by Private Enterprise.

In 1955, following a survey of all houses in the Rural Area, a statement will have to be submitted to the Ministry of Housing and Local Government, setting out the present position in regard to unfit houses and a statement of the Council's proposals for dealing with these unfit houses.

In this Annual Report, I again wish to express my appreciation of the help and co-operation I have received at all times from the members of the Council and from your officials and staffs.

I am,
Your obedient servant,

F.G.E. Hill.

EXTRACTS FROM THE VITAL STATISTICS FOR THE YEAR 1954.

Resident Population (Registrar General's Estimate) 19,200

LIVE BIRTHS:-

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Legitimate	152	149	301
Illegitimate	<u>6</u>	<u>5</u>	<u>11</u>
	<u>158</u>	<u>154</u>	<u>312</u>

Corrected Birth Rate 15.6
Birth Rate (Registrar General) 16.25

STILL BIRTHS.

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Legitimate	6	3	9
Illegitimate	<u>1</u>	<u>-</u>	<u>1</u>
	<u>7</u>	<u>3</u>	<u>10</u>

Rate per 1,000 (Live and Still-Births) 31.06

DEATHS.

	<u>Males</u>	<u>Females</u>	<u>Total</u>
	97	92	189
Death Rate (Registrar General)			9.84
Corrected Death Rate			11.8
Maternal Mortality Rate			Nil.

DEATHS OF INFANTS UNDER ONE YEAR.

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Legitimate	2	4	6
Illegitimate	<u>1</u>	<u>-</u>	<u>1</u>
	<u>3</u>	<u>4</u>	<u>7</u>

INFANTILE MORTALITY RATE:

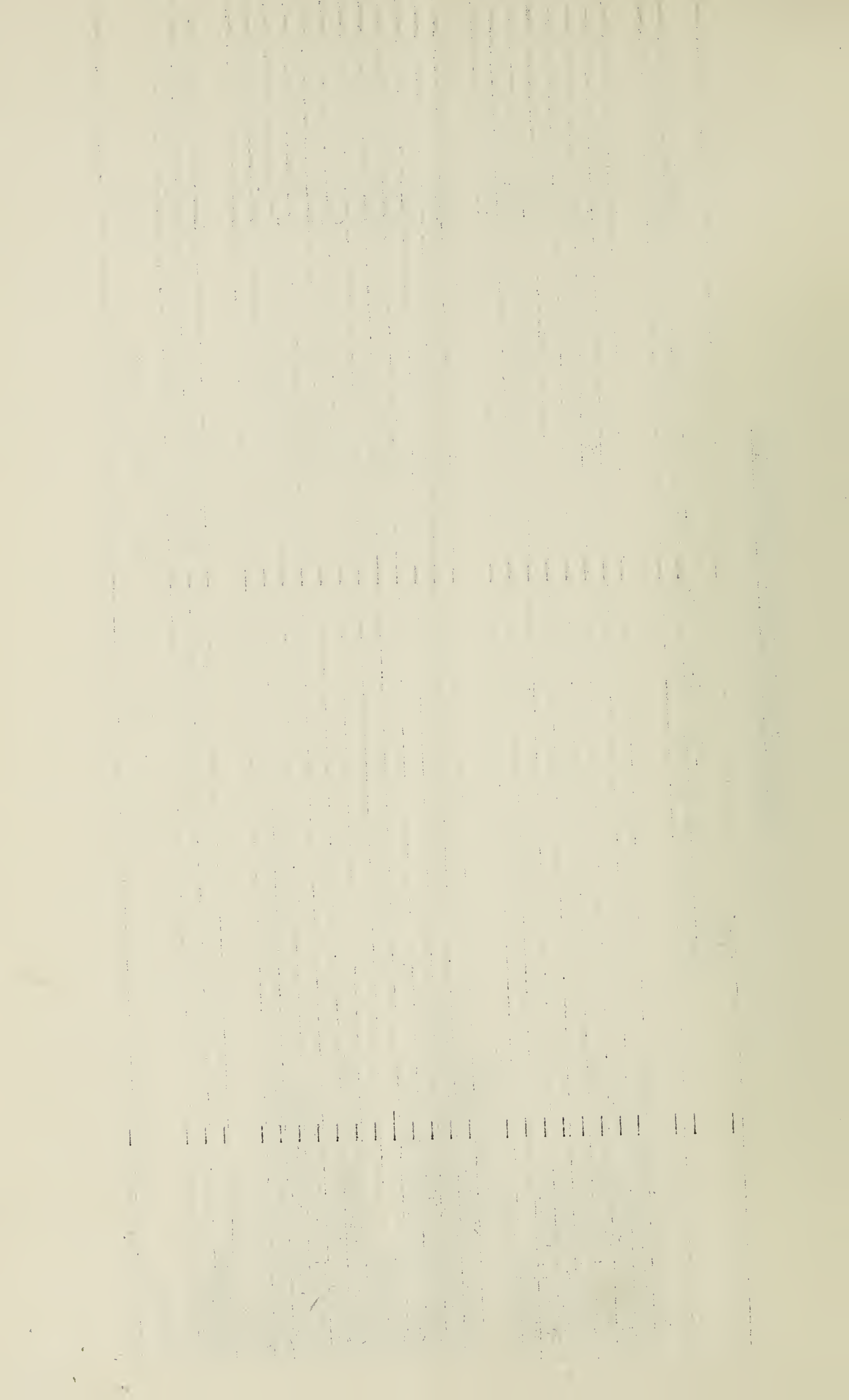
All Infants per 1,000 live births 22.11
Legitimate Infants per 1,000 legitimate
live births 20
Illegitimate Infants per 1,000 illegitimate
live births 90.9

YEAR	BIRTH Rate	DEATH RATE	INFANTILE MORTALITY RATE	MATERNAL MORTALITY RATE	T.B. DEATH RATE	INFECTIOUS DISEASE DEATH RATE	CANCER DEATH RATE
1949	18.5	11.8	38	-	0.32	0.05	1.83
1950	16.4	9.7	39	-	0.21	0.27	1.33
1951	17.0	10.1	15.3	3.01	0.26	0.05	1.51
1952	15.8	9.6	19.7	-	0.1	0.05	2.08
1953	18.0	9.0	26.2	-	0.1	-	1.78
1954	16.25	9.84	22.11	-	0.05	0.05	1.71

A statement is included here of certain statistics shown as a comparative table with reference to six recent years.
The table shows the general and particular trends in various vital and other statistics.

CAUSE OF DEATH AND AGE DISTRIBUTION.

	Under						75 and over								Total
	1 year		5 - 14		15-29		30-44		45-59		60-74		over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Tuberculosis, Respiratory										1				1	-
Meningococcal Infection														-	1
Cancer, Stomach															
Cancer, Lung and Bronchus														1	4
Cancer, Breast										1				2	5
Cancer, Uterus														1	-
Cancer, Others						1				2	1			2	8
Diabetes														2	10
Vascular Lesion of Central Nervous System															3
Coronary Disease & Angina					1					1	2			5	13
Hypertension with Heart Disease										1	2			7	16
Other Heart Disease								1						4	10
Other Circulatory Disease										3				2	12
Pneumonia										2	1			3	9
Bronchitis										1				2	6
Other Respiratory Diseases														1	5
Stomach Ulcers														1	3
Gastritis and Enteritis										1				1	10
Hyperplasia of Prostate														1	3
Congenital Malformations														1	5
Other defined and ill defined diseases														2	-
Accidents														4	2
Suicide														2	4
TOTALS	3	4	1	3	2	-	1	2	3	2	16	9	40	31	97



GENERAL HEALTH SERVICES.

Laboratory Facilities.

The Public Health Laboratory which is part of the service of the Medical Research Council (Ministry of Health) is established in the County Medical Officer's Department at Wakefield.

This laboratory accepts material for examination from Health and Sanitary Departments, from General Practitioners and others.

The examinations which can be carried out in this Laboratory are chemical, biological and bacteriological and as and when requested or necessary, certain materials or specimens submitted for test and requiring some special examination, can be sent to the Central Laboratory at Colindale.

Full advantage of the services offered by the laboratory are taken by the staff of your Health Department in the examinations of swabs and other personal specimens, and in the examinations of foods, water and so on.

Additionally, the personal assistance and advice of the Director of the Laboratory is available always on request.

Ambulance Services.

The ambulance service providing for the Wakefield Rural District, is administered by the West Riding County Council.

This service is available for the transport of patients in emergency, for general sickness, for infectious illness and for mental illness.

During 1954, the service has met efficiently all calls made on it.

General Hospital Accommodation.

The Rural District is adjacent to large County Boroughs which have General and Special Hospitals with comprehensive facilities for examinations and treatment. These Hospitals accept patients from the Rural Area and accommodation has always been available for urgent cases and in emergency.

There has been some little improvement with regard to bed accommodation for elderly chronic sick and for elderly infirm persons. A problem of accommodation, difficult of solution, however, still remains here.

Isolation Hospitals.

As reported previously, the provision of Isolation Hospital Accommodation is now the responsibility of the Hospital Board.

We have had no undue incidence or prevalence of these diseases, certainly not of cases requiring hospital isolation or treatment and in consequence there has been no difficulty in obtaining bed accommodation when required.

In general, cases of infectious sickness occurring in the Wakefield Rural District are admitted to Snapethorpe Hospital, but some cases are admitted to the Isolation Hospital at Barnsley.

When cases of acute poliomyelitis occur, they are admitted to Seacroft Hospital, Leeds and when this further treatment is required, they may be admitted to the special orthopaedic unit at Pinderfields Hospital, Wakefield.

The list of admissions to these Hospitals in 1954 is shown later in the Report.

Hospital After-Care.

The Health Services Act has made Hospital After-Care, the duty and responsibility of Local Health Authorities. Hospital After-care is a comprehensive term covering and including many services and to carry out this duty efficiently, a close liaison with hospitals must be maintained.

This is usually effected through Health Visitors, although in the work, all groups of nursing staff are concerned, and other social and welfare workers.

It is usual for requests for service to come from the Hospitals in individual cases.

In some cases requests come from patients direct who are aware of the services available; either direct or through private medical practitioners.

Maternity Services.

During the year, there has been again an increase in the numbers of requests received for Institutional or Hospital Lying-in-accommodation.

Last year, with 349 cases we had 155 of these mothers accommodated, a percentage of 44.4. This year, with 322 cases, there were 157 requests for lying-in accommodation, a percentage of 49. The anticipated demand is for rather over one half of the patients and the Wakefield Rural figure has approximated very closely to that percentage for 1954.

These patients have been accommodated in the County General Hospital at Wakefield, in Manygates Maternity Hospital, Wakefield, and in Walton Hall Maternity Home.

Sufficient lying-in accommodation has been available to meet all demands for the year under review and to meet all urgency and emergency requests.

DOMICILIARY MIDWIFERY SERVICE.

There have been no changes in this service during the year. Three whole-time midwives and two home nurse/midwives are employed in domiciliary midwifery practice in the Rural District.

Figures relating to this Service are given as follows:-

Number of Domiciliary Midwives employed either whole-time in this work or part-time	5
Total number of cases attended	<u>165</u>
Number of cases where the nurses attended:-	
(a) As Midwives	158
(b) As Maternity Nurses	<u>7</u>
	<u>165</u>
Number of cases where medical assistance was sought in emergency by Midwives	49
Total number of patients to whom gas and air analgesis was given	125
Percentage of cases receiving gas and air analgesia	75%

Corresponding figures for 1953 were as follows:-

Total no.of patients delivered by midwives in domiciliary practice	194
Total no.of patients receiving gas and air analgesia	
Percentage	83.4%

Maternal Mortality:

No maternal death occurred in the area in 1954.

Puerperal Pyrexia.

Seven cases of puerperal pyrexia were notified, i.e. a temperature occurring within the lying-in period.

In four of the cases, the patients were residents of a district outside the Rural Area but had been confined in institutions within the District. In all cases it was confirmed that the illness was not a puerperal infection, but a febrile condition occurring within the early period after confinement.

Premature Babies.

Babies born with a birthweight under $5\frac{1}{2}$ lbs, are notified as "premature born babies" and form a group for whom special care is required in early hours of infancy, and in many cases for some considerable period after birth.

In view of the urgency, for immediate and particular nursing care in these cases, the Local Health Authority has made arrangements for specially trained staff to attend on short notice, and also for a "premature baby cot" with all necessary equipment, to be available for these cases.

In view of the need for specially trained staff to be quickly available to take over the nursing care of the premature infant, the Local Health Authority has made detailed arrangements for this and also for "premature baby cots" with all necessary equipment to be similarly available at short notice.

The records show that in 1954, there were 18 notifications of premature live births and 4 notifications of premature still-births.

Of the 18 infants notified as prematurely born, all survived the first 28 days after birth.

Weight at Birth	No. of premature births		No. Dying	No. surviving 28 days.
	Born alive	Born dead (of over 28 wks. duration of pregnancy)		
lbs. 1 - $1\frac{1}{2}$	-	2	-	-
$2\frac{1}{2}$ - 3	-	1	-	-
3 - $3\frac{1}{2}$	1	-	-	1
$3\frac{1}{2}$ - 4	2	-	-	2
4 - $4\frac{1}{2}$	3	-	-	3
$4\frac{1}{2}$ - 5	5	1	-	5
5 - $5\frac{1}{2}$	7	-	-	7
TOTAL	18	4	-	18

Home Nursing Service.

There are three whole-time Home Nurses employed and two part-time Home Nurses employed, the latter being employed also in Domiciliary Practice.

The demands made on this service continue to increase and this is shown in the statement of the work of the Home Nurses in 1954:-

Area	Number Treated					Total Visits
	Medical	Surgical	Injections	Maternity	T.B.	
Bretton, Notton, Woolley	81	41	-	8	1	3103
Middlestown, Overton, Netherton.	83	80	-	-	3	2562
Crofton and Wintersett	83	65	-	-	3	3932
Crigglestone, Walton and Newmillerdam	100	50	2	2	3	2276
Sharlston, Warmfield and Kirkthorpe	180	16	-	-	1	2434
TOTALS	527	252	2	10	11	14,307

Home Help Service.

During the year the establishment of Home Helps has again been increased by the Local Health Authority with the approval of the Ministry.

The establishment for Division 13 (original) has been increased to the equivalent of 20 whole-time Home Helps. This increased establishment has enabled more cases requiring this service to be assisted, particularly cases where the request is on account of age and infirmity associated with old age. Additional assistance has been available for many chronic sick persons.

The demand for the Home Help Service continues an increasing one, and particularly does this increasing demand come in respect of elderly infirm persons. As reported earlier, an efficient provision of the Home Help Service does lead to an economy of the use of hospital and institutional bed accommodation.

The following statement shows how the Home Helps were employed during the year:

<u>Type of Cases</u>	<u>No. of Cases</u>	<u>Hours Employed.</u>
Tuberculosis	2	507
Chronic Sick	82	16,756
Maternity	13	1,029
Other Illnesses	12	511
	<u>109</u>	<u>18,803</u>

Mental Health.

One Mental Health Social Worker employed by the County Authority devotes approximately half-time to cases in Ossett, Horbury and Wakefield Rural Districts.

The work is carried out in respect of two categories of patients; in one classification are children and older persons who have been ascertained under the Mental Deficiency Acts, and in the other, cases of mental illness.

The former are under Statutory Supervision in most cases and the latter under Voluntary Supervision, and here the duties are care and after-care in association with the various mental hospitals where such cases receive treatment.

The Mental Health Social Worker has submitted the following statement with regard to her work in this area in 1954:-

There were 44 persons under Statutory Supervision in their own homes. Twenty were in employment and eight children were attending Occupation Centres, five at Wakefield and three at Castleford.

There were nine adults under Voluntary Supervision and of these four were in full-time employment.

One patient was under Guardianship.

New and existing after-care cases from mental hospitals numbered 12.

INFANT WELFARE SERVICES.

The Infant Welfares held in the Wakefield Rural District are as follows:-

CROFTON.

In the Mission Hall each Monday afternoon
from 2.30 p.m. to 4 p.m.

SHARLSTON.

In the St. Luke Hall each Tuesday afternoon
from 2.30 p.m. to 4 p.m.

MIDDLESTOWN.

In the Church School Room, each Tuesday afternoon
from 2.30 p.m. to 4 p.m.

CRIGGLESTONE.

In the Village Institute Hall each Wednesday afternoon
from 2.30 p.m. to 4 p.m.

The attendances at these clinics for the year 1954 are shown in the tables below:-

(1) Crofton Infant Welfare Centre:-

Total attendances, 1954:

(a) Children under 1 year	1046
(b) Children between the ages of 1 and 5 years	376
Total	<u>1422</u>

(2) Average attendance per session 30

Children attending for the first time in 1954 and who at the time of their first attendance were:

(a) Under 1 year of age	65
(b) Between the ages of 1 and 5 years	109
Total	<u>174</u>

(1) Sharlston Infant Welfare Centre:-

Total attendances, 1954:

(a) Children under 1 year	1130
(b) Children between the ages of 1 & 5 years	519
Total	<u>1649</u>

(2) Average attendance per session 34

Children attending for the first time in 1954 and who at the time of their first attendance were:

(a) Under 1 year of age	65
(b) Between the ages of 1 and 5 years	126
Total	<u>191</u>

INFANT WELFARE SERVICES, contd.

(1) Middlestown Infant Welfare Centre:-

Total attendances, 1954:

(a) Children under 1 year	663
(b) Children between the ages of 1 and 5 years	<u>349</u>
Total	<u>1012</u>

(2) Average attendance per session 22

Children attending for the first time in 1954 and who at the time of their first attendance were:

(a) Under 1 year of age	40
(b) Between the ages of 1 and 5 years	<u>110</u>
Total	<u>150</u>

(1) Crigglestone Infant Welfare Centre:-

Total attendances, 1954:

(a) Children under 1 year	1046
(b) Children between the ages of 1 and 5 years	<u>376</u>
Total	<u>1422</u>

(2) Average attendance per session 30

Children attending for the first time in 1954 and who at the time of their first attendance were:

(a) Under 1 year of age	65
(b) Between the ages of 1 and 5 years	<u>109</u>
Total	<u>174</u>

Again, there has been a falling off in the attendances at the various Infant Welfare Centres in the Rural District

Total attendances in 1954 were 5598 and total attendances in 1953 were 5870.

It is however interesting to note that the total attendances of infants under 1 year show an improvement this year, being 3990 attendances as compared with 3645 in 1953. On the other hand, the attendances of children aged between 1 and 5 years dropped from 2225 in 1953 to 1608 in 1954.

The falling away in numbers has been chiefly at the Crofton and Crigglestone Clinics, whereas in the Sharlston clinic has been an improvement in the attendances of both the under ones and the older age group.

This is in accordance with what we find in other administrative areas and is in accordance with the trend we are experiencing as a result of the introduction and development of other welfare services.

The figures of average attendance remain satisfactory.

Statement of Dried Milk and other preparations distributed at the various Infant Welfare Centres in 1954:-

Table of Sales and Free Issues:

Sales at Full Cost.

	<u>Criggle-</u> <u>stone</u>	<u>Crofton</u>	<u>Sharlston</u>	<u>Middles-</u> <u>town.</u>
Cow & Gate Dried Milk	381	70	181	1107
Ostermilk Dried Milk	1401	1890	1831	458
Trufood Dried Milk	5	-	1	59
Horlicks Dried Milk	411	232	557	263
Farex	103	101	86	62
Cerex	-	-	-	15
Robinson's Groats	64	14	19	77
Robinson's Barley	24	-	-	-
Robrex	-	45	33	27
Scotts Food	45	16	95	60
Trufood Cereal	-	-	3	71
Bovril Weaning Cubes	22	32	336	74
Maltoline	-	10	14	41
Roboleine	5	-	-	-
Virol	72	68	127	149
Ovaltine	259	233	394	71
Nestles Strained Foods	-	42	170	-
Cod Liver Oil and Malt	35	17	59	-
Ribena	1	-	13	-
Rose Hip Syrup	-	42	42	32
Glucose	248	109	365	90
Liquid Paraffin	-	32	8	-
Minadex	16	26	43	14
Lactogol	6	-	-	2
Colact	5	28	12	5
Robsoup	24	20	29	55

Free Issues.

Ostermilk Dried Milk	-	92	-	-
Farex	-	1	-	-
Robrex	-	14	-	-
Minadex	-	1	-	-

Distribution of Welfare Foods:

During the year, the Local Health Authority, i.e. the West Riding Council, took over from the Ministry of Food, responsibility for the distribution in the County's administrative area of National Dried Milk, of Orange Juice, and vitamin preparations. The distribution had been, in recent times, through local offices of the Ministry of Labour.

In consideration of the volume of work transferred to the Divisional Health Staff, one clerk, previously employed in the Ministry of Food in this work was appointed on the Divisional Health Staff to assist in the actual distribution of these foods and to assist in the additional clerical work of the distribution.

Pre- and Post-Natal Clinics.

Pre- and Post-natal clinics for mothers are held at four centres in the Rural District, i.e. at Crigglestone, at Crofton, at Sharlston and at Middlestown.

The figures of attendances at these clinics for the last year are shown in the following statement:-

	Criggle- stone	Crofton	Sharlston	Middles- town.
	1st.Fri. in mth. 10-12 a.m.	Alternate Weds. 10-12 a.m.	Alt. Weds. 10-12 a.m.	Alt. Tuesdays 10-12 a.m.
<u>Ante-natal Clinics.</u>				
Total no.of women who attended	18	26	24	13
Total no.of attendances	38	60	62	42
Average attendance per session	3	2	2	2
<u>Post-Natal Clinics.</u>				
Total no.of women who attended	7	-	4	4
Total no. of attendances	7	-	4	4

Again, the figures given show a falling off in attendances at these clinics, the average attendance per session for the four clinics being little more than 2.

In view of the falling attendances, the pre- and post-natal clinics referred to here have now been combined with the Infant Welfare Centres in the four respective districts, in accordance with the County Council policy.

For some years, there have been fewer attendances at Maternity clinics of Local Authorities, largely because of other provision made for these patients under the National Health Service. In the majority of cases now the supervision and care is undertaken at the institutions or hospitals where arrangements have been made for lying-in, or is undertaken by the patient's own private medical attendant.

Distribution of Welfare Foods contd.

The new arrangements came into force in June, 1954.

In general, the Local Health Authority agreed to offer to the public, similar facilities to those obtaining before the date of transfer.

A Statement of the Food and other preparations distributed in the Infant Welfares and elsewhere under the scheme up to the end of the year is given in the summary below:-

	<u>Woolley</u>	<u>Criggle-</u> <u>stone</u>	<u>Crofton</u>	<u>Sharlston</u>	<u>Middle-</u> <u>stown</u>
National Dried Milk	-	369 tins	761 tins	600 tins	206 tins
Orange Juice	43 bottles	410 bots.	330 bots.	643 bots.	529 bots.
Cod Liver Oil	22 bots.	122 bots.	107 bots.	128 bots.	121 bots.
A & D. Capsules	-	10 pkts.	15 pkts.	31 pkts.	34 pkts.

Health Visitors.

Home Visiting.

In recent years we have seen a change in the duties and responsibilities of Health Visitors.

To-day, in improved social and welfare conditions, the routine visiting of infants and toddlers has undergone modification, and selective visiting in indicated cases is now the accepted practice.

Very much of this applies in respect of the attendance of infants and under-school-age children at the Welfare Centres.

On the other hand, many additional duties have become the responsibility of the Health Visitors who are regarded principally as Health Educators and as Social Workers concerned with the care of various handicapped and other persons such as the aged persons, problem families, neglected children, and others.

Consequently in this widening field, their work becomes of increasing importance and responsibility. Still, an intimate acquaintance with home conditions will continue to remain an important factor in the work of Health Visitors and the following summary indicates the scope of the visiting carried out in Wakefield Rural Area during the year under review:-

	<u>Sharlston</u>	<u>Crofton</u>	<u>Crigglestone</u>	<u>Middles-town.</u>
(1) <u>To Expectant Mothers.</u>				
(a) First Visits	18	18	11	18
(b) Re-visits	79	10	1	14
(2) <u>To children under 1 yr. of age.</u>				
(a) First Visits	61	50	106	67
(b) Re-visits	803	350	897	353
(3) <u>To children 1-2 yrs. of age.</u>				
Total Visits	726	200	339	224
(4) <u>To children 2-5 yrs. of age.</u>				
Total Visits	621	299	282	337
(5) <u>Other Visits.</u>	521	260	940	302
Total Visits - 7,908.				

SCHOOL HEALTH SERVICE.

There are 14 schools and these include 19 school departments, in the Wakefield Rural Area.

The school-roll for 1954 is given as 2386 children.

In 1954, Routine or Periodic Medical Inspections of children attending the schools were carried out in respect of three age-groups, namely the group of infants or entrants, an intermediate group of school children attaining to the age of 11 years in the current year, and a group of leavers, examined in the term in which they will leave school.

A full statement of the examinations carried out in 1954 is given in the summary below:-

SCHOOL	No. of Sessions	No.of children seen						
		Routine						Non- Routine.
		Total	Entrants	7-8 years group	Last year primary	First year secondary	Last year secondary	
Heath Parochial	1	16	12	-	4	-	-	9
Warmfield	2	31	8	9	14	-	-	8
Sharlston C.P.Mixed	9	101	-	-	55	-	46	144
Sharlston C.P.Inf.	6	90	90	-	-	-	-	35
Sharlston National	2	37	9	-	25	-	3	16
Crigglestone C.P. Infants	2	26	26	-	-	-	-	21
Crigglestone C.P. Mixed	1	19	-	-	19	-	-	23
Crigglestone C.ofE.	2	22	8	-	14	-	-	7
Newmillerdam	2	11	5	1	5	-	-	16
West Bretton	2	10	-	1	9	-	-	20
Walton C.P.	4	42	19	-	23	-	-	59
Woolley Colliery C.P.	1	9	9	-	-	-	-	25
Netherton	-	-	-	-	-	-	-	-
Middlestown C.P. Infants	2	29	29	-	-	-	-	17
Middlestown C.P. Mixed	2	33	-	-	33	-	-	19
Crofton C.P. Infs.	4	50	50	-	-	-	-	42
Crofton C.P. Junior)								
Mixed.Crofton Sec.Mod)	6	96	-	-	21	35	40	65
Woolley C.ofE.	1	6	6	-	-	-	-	6
	49	628	271	11	222	35	89	532

CLEANLINESS SURVEYS.

The School Nurses attend every school at regular intervals in the year to examine the school children for uncleanly and verminous conditions.

The Table gives a summary of the numbers examined in the individual school departments and also shows the numbers and percentages of the children found to be uncleanly or to have hair or other infestation with vermin.

Where uncleanly or verminous conditions are found, parents are informed and advised re treatment - in neglected and serious cases, warnings are given and if necessary legal proceedings are taken.

SCHOOL	No. of children on register	No. of individual children found to be infested	Percentage of individual children infested.	
			1953	1954
Crigglestone C.of E.	97	3	-	3.09
Crigglestone C.P. Infs.	85	4	10.61	4.7
Crigglestone C.P.Mixed	211	18	9.71	8.53
Crofton C.P.Infs.	158	20)		12.66
Crofton C.P. Mixed and)	6.79	
Secondary Modern	453	5)		1.1
Heath	38	-	-	-
Middlestown C.P.Infs.	73	1)		1.37
Middlestown C.P.)	5.57	
Junior Mixed	146	3)		2.05
Netherton	134	5	10.27	3.73
Newmillerdam	54	5	10.0	9.26
Sharlston C.P.Infs.	149	10	12.79	6.71
Sharlston C.P. Mixed	380	3	12.54	.83
Sharlston National	54	-	11.0	-
Warmfield	65	1	14.10	1.54
Walton	146	10	3.46	6.85
West Bretton	40	-	-	-
Woolley Colliery C.P.	102	2	7.07	1.97
Woolley C.of E.	21	-	14.27	-

DENTAL SERVICE.

There is a Dental Clinic at the Central Clinic at Croft House, Ossett

There is no provision of routine dental inspection and treatment in the area under review, but emergency and selected cases can be dealt with by appointment at the Dental Clinic at Ossett and at the West Riding County Council Dental Clinic at Wakefield

The lack of provision of routine inspection and treatment is due entirely to the difficulty of obtaining Dental Officers for this work, the County's Dental Service being short staffed.

Nutrition.

The nutrition of each individual child examined at routine inspections, is assessed by the Medical Officer carrying out the examinations and the state of nutrition is stated as A, (Good), B (Average) and (C) Poor.

The findings are given in the accompanying Table and it is noticed that no child examined during the year showed evidence of marked defective nutrition.

	A.	B.	C.
Entrants	196	75	-
7-8 year group	7	4	-
Last year Primary	130	92	-
First year Secondary	19	16	-
Last year Secondary	71	18	-
	<u>423</u>	<u>205</u>	<u>-</u>

Treatment Clinics: School Health Service.

The Minor Ailment Clinics in the Rural Area are at Crofton, Sharlston, Walton, Crigglestone, Middlestown and Netherton.

The Central Clinic serving the area is at Croft House, Ossett, and it is here that special and consultant clinics are held, although for some Clinic Services children may be referred to the County Premises at Wakefield.

Special inspections are usually arranged at Croft House, Ossett. Treatment services available to the school children include the treatment of minor ailments and injuries, including skin diseases. The treatment of eye diseases and defects and the testing for errors of refraction (Consultant Clinic). There is a Consultant Ear, Nose and Throat Clinic and also a Speech Therapy Clinic.

Minor orthopaedic and remedial treatments are given in the Central Clinic.

There are no facilities for Ultra-Violet Light Treatment at the Central Clinic.

Attendances at the various clinics in the Rural District in 1954 are given below:-

<u>Clinic</u>	<u>Sessions</u>	<u>No. of attendances</u>	<u>Average per session</u>
Crofton	72	1713	23
Sharlston	55	1430	26
Walton	38	695	18
Crigglestone	38	817	21
Middlestown	35	443	12
Netherton	30	359	12

PREVALENCE OF AND CONTROL OVER NOTIFIABLE AND
OTHER INFECTIOUS DISEASES.

The notifications of these Diseases received in 1954 were as follows:-

	Total Cases Notified	School Children Only	No. admitted to Hospital	No. Died
Scarlet Fever	9	5	8	-
Diphtheria	-	-	-	-
Pneumonia	33	8	12	8
Puerperal Pyrexia	7	-	1	-
Erysipelas	2	-	-	-
Whooping Cough	25	7	1	-
Measles	16	3	-	-
Cerebo-Spinal Fever	3	1	3	1
Ophthalmia Neonatorum	-	-	-	-
Poliomyelitis	1	1	1	-
Dysentery	13	2	1	-
Food Poisoning	3	-	3	-
Tuberculosis - Pulmonary	12	-	10	1
Non-Pulmonary	4	1	1	-
Pemphigus Neonatorum	1	-	1	-
Totals.	129	28	42	10

Reference to this Table shows that there was no undue incidence or prevalence of infectious illness reported in 1954.

Nine cases of scarlet fever were reported, 5 in school children, and eight of these cases were admitted to hospital.

In all cases the illness was mild and of the type which has been occurring in recent years.

There were 25 notifications of Whooping Cough and 16 cases of Measles reported. These figures do not reflect the prevalence of the illnesses in neighbouring areas during the year.

33 cases of pneumonia were notified, again 8 in school children, and 12 cases of the illness were admitted to hospital for treatment. 8 deaths from pneumonia were reported, 5 in males and 3 in females.

3 cases of meningo-coccal meningitis were reported. These 3 cases were notified from hospital and 1 death occurred.

1 case of acute poliomyelitis also was notified. The patient, a school child, was admitted to hospital and subsequently discharged.

Three cases of Food Poisoning were reported. Again, these cases were reported from hospital and in two cases the infecting organism was identified as of the salmonella group - typhi-murium. There was a considerable outbreak of food poisoning in the area of a neighbouring Local Authority and it is considered that these cases were associated with that outbreak.

With regard to the third case, no infecting organism was determined as the cause of the illness.

13 cases were notified as suffering from Dysentery. Of these 1 case was admitted to hospital and subsequently discharged. These were infections with the Shigella Sonnei organism and all the cases were mild in character. These are generally considered as food borne infections. They have been very prevalent in recent years and probably the number of cases notified are much fewer than the cases actually occurring.

One case of Pemphigus Neonatorum occurred in a Maternity Home and called for special precautionary measures to be taken.

The hospital accommodation available for cases of infectious illnesses is satisfactory.

AGE GROUP INCIDENCE AND ANALYSIS OF NOTIFIABLE DISEASES.

DISEASE	0	1	1	2	2	3	3	4	4	5	5	10	10-15	15-20	20-35	35-45	45-65	65+	Total
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	1	2	-	-	-	-	1	-	-	5	-	-	-	-	-	-	-	-	9
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	2
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7	-	-	-	7
Pneumonia	4	2	2	1	1	1	1	2	2	6	1	2	1	1	3	2	5	4	33
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	1	2	2	2	2	2	1	-	-	1	1	-	1	1	-	1	2	-	11
Tuberculosis - Pulmonary	-	1	1	-	-	-	-	-	-	-	-	-	-	3	4	1	1	2	12
- Non-Pulmonary	-	-	-	-	-	-	1	1	-	1	-	-	-	-	1	-	-	-	4
Whooping Cough	4	2	2	3	3	3	3	6	6	7	-	-	-	-	-	-	-	-	25
Cerebo-Spinal Fever	-	1	1	-	-	-	-	1	1	1	-	-	-	-	-	-	-	-	3
Measles	1	6	6	2	2	3	3	1	1	3	-	-	-	-	-	-	-	-	16
Poliomyelitis	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Food Poisoning	-	-	-	-	-	-	-	1	1	1	-	-	-	-	1	1	-	-	5
Pemphigus Neonatorum	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
TOTALS	12	16	16	8	8	10	10	12	26	2	5	16	5	10	7	129			

AGE GROUP MORTALITY

ANALYSIS OF NOTIFIABLE DISEASES.

DISEASE	0-1	1-2	2-5	5-15	15-25	25-45	45-65	65+	Total
Diphtheria									Nil
Scarlet Fever									Nil
Erysipelas									Nil
Puerperal Pyrexia									Nil
Pneumonia	1						5	2	8
Ophthalmia Neonatorum									Nil
Dysentery									Nil
Tuberculosis: Pulmonary Non-Pulmonary								1	1 Nil
Whooping Cough									
Cerebo-Spinal Fever		1							1
Measles									Nil
Poliomyelitis									Nil
Food Poisoning									Nil
TOTAL	1	1					5	3	10

Ophthalmia Neonatorum.

Notified	Cases Treated		Vision Un-impaired	Vision Impaired	Total Blind-ness	Deaths
	At Home	In Hospital				
NIL	NIL	NIL	NIL	NIL	NIL	NIL

TUBERCULOSIS.

New Cases and Mortality during 1954.

	Notifications	Deaths.
Pulmonary	12	1
Non-Pulmonary	4	-
	16	1

AGE GROUPS	New Cases				Deaths			
	Respiratory		Non-Respiratory		Resp.		Non-Resp.	
	M	F	M	F	M	F	M	F
0 - 1	-	-	-	-	-	-	-	-
1 - 5	1	-	-	2	-	-	-	-
5 - 15	-	-	-	1	-	-	-	-
15- 25	-	4	-	-	-	-	-	-
25- 35	1	2	-	1	-	-	-	-
35- 45	1	-	-	-	-	-	-	-
45- 55	-	1	-	-	-	-	-	-
55- 65	-	-	-	-	-	-	-	-
65 and upwards	1	1	-	-	1	-	-	-
	4	8	-	4	1	-	-	-

DIPHTHERIA IMMUNIZATION.

The work of diphtheria immunization continues and every effort is made to get parents to accept treatment for their infants and young children.

The approach to parents is usually an approach to individual parents made by Health Visitors in the course of their routine duties, but other nurses of the Department and medical staff also assist with propaganda and individual talks.

As a result of these efforts, 276 children received a full primary course of treatment during the year and a further 370 children who had had full primary treatment earlier, received a reinforcing single dose treatment before starting school life at which time, it is presumed, an additional risk of contracting infection is incurred.

At the end of the year a total of 2675 infants, under school-age children and school-age children, had received protective treatment. This represents 65% of the child population of the Wakefield Rural District.

This figure cannot be said to be satisfactory or to represent a sufficiently high community protection, but we find that a proportion of the parents, who in times of prevalence of diphtheria would accept this protective treatment, do fail to take advantage of the service provided when no diphtheria cases are occurring and the danger of diphtheria infection appears then to be remote.

VACCINATION AGAINST SMALLPOX.

The number of children and older persons vaccinated during the year were as follows:-

Infants under 1 year	82
Children aged 1 to 4 years	3
Children aged 5 to 15 years	4
Older persons	6
Total	<u>95</u>

In addition the re-vaccination of 6 persons is recorded.

These figures are better than those recorded in many areas.

IMMUNIZATION AGAINST WHOOPING COUGH.

The scheme of the West Riding County Council provides for the immunization against whooping cough of infants and children up to the age of 4 years.

Treatment of older children can be given by Private Medical Practitioners but not under the County Scheme.

It is shown that 148 infants and children received this treatment in 1954 and that since the scheme was introduced in 1952, a total of 393 children have been ummunized.

As reported elsewhere, we received notifications of 25 cases of whooping cough for the year, but inquiry showed that no one of these children contracting the illness had received a previous protective immunizing treatment.

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA.

(a) Water Supply.

Mains water is now supplied to all but 8 of the houses and domestic premises in the Rural Area.

The Council has no direct supply of its own and water is received from Wakefield City (about two thirds of the total supply), from Dewsbury (about one sixth of the total supply), and from Royston, Darton and Kirkburton.

A new source of supply during the year is from Barnsley and this replaces a well supply in Woolley which is now discontinued.

Owing to difficulties of pressure, storage, etc. there has been inadequate water supplies in various parts of the area and in particular in Crofton and Sharlston and in Middlestown.

Additional pumping and storage arrangements were installed to relieve the position in Middlestown, and these were in effective operation from September.

(b) Drainage and Sewerage.

There has been one sewer extension only in 1954 - a new length of approximately 50 yards in Middlestown.

There are improvements or extensions still required in various parts of the District - particularly at Sharlston and at Horbury Bridge.

Schemes are under consideration at the end of the year.

(c) Housing.

New buildings in 1954:

New Council Houses completed in 1954	222
New Houses provided by Private Enterprise	
in 1954	<u>15</u>
Total	<u>237</u>

Total number of Council Houses in the Rural District	
at 31st December, 1954	<u>1,740.</u>

Number of individual unfit houses represented	
during 1954	33

Number of individual houses demolished in 1954	24
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